

Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>	Complete if Known <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>Unknown</td> </tr> <tr> <td>Filing Date</td> <td>Even Date Herewith</td> </tr> <tr> <td>First Named Inventor</td> <td>Martin, Robert</td> </tr> <tr> <td>Group Art Unit</td> <td>Unknown</td> </tr> <tr> <td>Examiner Name</td> <td>Unknown</td> </tr> </table>	Application Number	Unknown	Filing Date	Even Date Herewith	First Named Inventor	Martin, Robert	Group Art Unit	Unknown	Examiner Name	Unknown
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First Named Inventor	Martin, Robert										
Group Art Unit	Unknown										
Examiner Name	Unknown										
Sheet 1 of 1	Attorney Docket No: KMG1090										

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Examiner Initials*	Cite No ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

EXAMINER DINH Q. NGUYEN

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